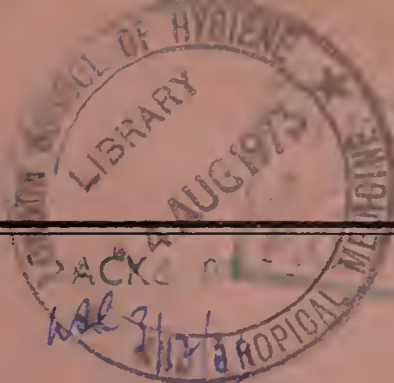


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PEMBROKESHIRE COUNTY COUNCIL

ANNUAL REPORT

of the

County

Medical Officer of Health

for Pembrokeshire

1968

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TO THE CHAIRMAN AND MEMBERS OF THE
HEALTH COMMITTEE OF THE
PEMBROKESHIRE COUNTY COUNCIL

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my sixteenth annual report. The local health record for 1968 was generally good: the incidence of infectious diseases was low ; the peri-natal and infant mortality rates, the lowest recorded in the County, were appreciably below the national figures ; and there was a further fall in the number of new notifications of tuberculosis.

The main section of the report includes a general account of changes and developments during the year in the local health authority services provided by the County Council as part of the National Health Service. In this County, the majority of these services continued to expand though the necessary forward planning was hampered by the uncertainties concerning the future organisation of the National Health Service, local government and the personal social services.

The County Council welcomed the announcement of the Chairman of the Welsh Hospital Board, on the 29th July, 1968, of the decision to provide, within the next decade, a modern general hospital, in a one-stage development, at Haverfordwest; the new proposal is a very considerable advance on the previously suggested schemes.

There were a number of developments during the year : the vaccination of children against measles was initiated ; the chiropody services for the elderly and handicapped were augmented ; a ' meals on wheels ' service was commenced at Haverfordwest ; the appointment of additional ambulance personnel facilitated the availability of ambulances for accidents and other emergencies ; a social club for the mentally handicapped was initiated at Haverfordwest ; the clinics at Neyland and Narberth were converted, without structural alterations, into health centres; and an approved training scheme for district nurses was established.

I am grateful to the Chairman and members of the Health Committee for their continued support and interest. My thanks are also due to the staff of the County Health department, including the nurses, home helps, and the ambulance and training centre staff, for their efforts during the year. Continued helpful assistance was received from the two district medical officers of health, the family doctors, and the local hospital consultants.

Considerable assistance has been received from Miss G. M. Knight, my secretary, with the preparation of the manuscript, and many of the statistics have been prepared by Mr. J. Thomas, a senior clerk of the department.

I am,

Ladies and Gentlemen,

Your obedient Servant,

D. J. DAVIES,

County Medical Officer of Health

County Health Department,
Haverfordwest.
29th August, 1969.

COUNTY OF PEMBROKE
HEALTH COMMITTEE

(as on 31st December, 1968)

Chairman :

County Alderman D. W. Evans

Vice-Chairman :

Councillor O. G. John, O.B.E.

County Aldermen :

E. Anthony, M.B.E.
Rev. Mathias Davies
E. G. Griffiths

S. J. Morris
Mrs. A. Norman
R. S. Wade

County Councillors :

T. W. H. Byard
W. Carr
A. Edwards
C. M. George
Rev. W. Harry
T. V. Hay
W. A. Jacob
J. M. James

Mrs. R. D. Keane
J. F. Knowles
T. Lewis
C. E. Nicholls
H. W. Phillips
F. R. Sandall
W. H. Symmons
Rev. John Thomas

Co-opted Members :

Miss E. M. Sturgess Mrs. G. Evans

Local Medical Committee Representatives :

Dr. A. N. Bond Dr. J. A. K. Douglas Dr. C. L. Perry

Pembrokeshire Federation of Women's Institutes Representatives :

Mrs. E. Burdett Mrs. M. Ramsden

South-West Wales Hospital Management Committee

Representatives :

Rev. T. Arwyn Thomas Rev. J. Lumley Williams
Dr. M. Rowland Evans

STAFF OF COUNTY HEALTH DEPARTMENT 1968

*County Medical Officer of Health and Principal
School Medical Officer :*

D. J. Davies, M.B.E., B.Sc., M.D., B.S., D.P.H.

*Deputy County Medical Officer of Health and Deputy Principal
School Medical Officer :*

M. Lawlor, M.B., B.Ch., B.A.O., L.M., D.C.H., D.P.H.

District Medical Officers of Health :(These Officers devote up to 25 per cent of their time to
County Council duties)

P. E. M. Bowen, M.R.C.S., L.R.C.P., D.C.H., D.P.H.

W. J. Y. Speedy, M.B., B.Ch., L.R.C.P. & S., L.R.F.P. & S., D.P.H.

Assistant County Medical Officers and School Medical Officers :

F. J. Harrison, M.B., B.Ch., B.A.O.

J. F. Rees, B.Sc., M.B., B.Ch.

C. M. E. Rees, M.A., M.B., B.Chir., M.R.C.S., L.R.C.P.
(Part-time)*Chief Dental Officer and Principal School Dental Officer :*

D. G. James, L.D.S., R.C.S.

School Dental Officers :

Mrs. P. Jenkins, B.D.S.

G. Hellings, L.D.S.

R. R. Lewis, L.D.S., R.C.S.

A. D. Hanson, B.D.S.

County Nursing Officer :

Miss J. M. Young, S.R.N., S.C.M., Q.N.Cert., H.V.Cert.

Senior Orthopaedic Physiotherapist :

Mrs. C. Griffiths, M.C.S.P.

County Home Help Organiser :

Miss M. R. F. Collins

Assistant Home Help Organiser :

Miss M. A. M. Smith

Group Adviser Health Visitors :

Miss S. M. Morgan, S.R.N., S.C.M., H.V.Cert.

Miss L. B. Williams, S.R.N., S.C.M., H.V.Cert.

County Ambulance Officer :

P. J. Hunt, F.I.A.O.

Speech Therapist :

Miss M. Thompson (Part-time)

Chiropodist :

M. Cavell, M.Ch.S., S.R.Ch. (Commenced 15.7.68)

Consultant Child Psychiatrist :

Evan W. Davies, M.B., B.Ch., M.R.C.P., D.P.M.

Educational Psychologist :

C. B. E. James, B.A., M.Ed., Ph.D., A.B.Ps.S.

Supervisors of Training Centres :

Mrs. A. Berry

Mrs. E. M. P. Davies

Chief Clerk :

C. R. Dench, A.R.S.H.

Other Nursing Staff :

(as at 31st December, 1968) :

10 Health Visitors and School Nurses

17 District Nurse/Midwife/Health Visitor/ School Nurses

13 District Nurse/Midwives

17 District Nurses

1 Clinic Nurse

1 Enrolled Nurse

1 District Nurse/Health Visitor/School Nurse

Home Helps :

240 Occasional Home Helps

COUNTY COUNCIL COMMITTEES

(concerned with matters of Health)

1. Health Committee
 - (a) Nursing Sub-Committee
 - (b) General Purposes Sub-Committee
 - (c) Ambulance Sub-Committee
 - (d) Mental Health Sub-Committee
2. Public Health and Housing Committee
3. Education Committee responsible for School Health Service

SECTION I

VITAL STATISTICS FOR 1968

1. AREA

The area of the County, including inland water, is 393,007 acres.

2. POPULATION

1911—By Census	...	...	...	90,014
1921—By Census	...	...	...	91,580
1931—By Census	...	...	...	86,020
1938—Estimated Mid-Year	...	...	...	83,200
1945—Estimated Mid-Year	...	...	...	82,690
1951—By Census	...	...	...	90,906
1953—Estimated Mid-Year	...	...	...	92,090
1955—Estimated Mid-year	...	...	...	93,800
1957—Estimated Mid-year	...	...	...	93,670
1959—Estimated Mid-Year	...	...	...	94,600
1961—By Census	...	...	...	93,980
1962—Estimated Mid-Year	...	...	...	93,050
1963—Estimated Mid-Year	...	...	...	94,660
1964—Estimated Mid-Year	...	...	...	95,350
1965—Estimated Mid-Year	...	...	...	95,920
1966—By Census	...	...	...	96,530
1967—Estimated Mid-Year	...	...	...	98,330
1968—Estimated Mid-Year	...	...	...	100,360

3. FINANCIAL

The product of a penny rate for the financial year 1968/69 was £16,011.

Rateable value of the County on the 1st April, 1968, was £3,705,410.

4. GENERAL OBSERVATIONS

The Registrar General's estimated figure for the 1968 mid-year resident population shows an increase of 2,030 over the estimation for the previous year. The highest increase was in the Haverfordwest borough and the only decrease of population was in the Cemaes rural district.

According to available information, only twenty-two immigrants, including nine non-Europeans, entered the County in 1968.

As compared with the previous year, there was a slight decrease in the birth-rate, but the rate remained appreciably above the figure for England and Wales. The adjusted birth-rate for the urban areas was higher than in the rural districts: the highest rate was in the Neyland urban area and the lowest in the Cemaes and Pembroke rural districts. There was one less illegitimate birth than in the previous year.

It is pleasing to report that the peri-natal mortality rate, an index in certain respects of the standards of care of expectant mothers and new born babies, was the lowest recorded in the County and was below the national figure for England and Wales for the first time since records of this rate have been available. The local still-birth rate was lower than in 1967 and was less than the national figure; this trend was also a feature of the early and ordinary neo-natal rates. There was a surprisingly marked reduction in the infant mortality rate, which was appreciably below the figure for England and Wales and the lowest rate recorded in Pembrokeshire.

The low mortality rates described in the last paragraph are encouraging, but, it is important to remember that, in a County with a comparatively small population, fluctuations of vital statistics are not always significant.

The adjusted death rate was slightly less than in the previous year and remained a little above the national figure. There was one maternal death: the cause was a pulmonary embolism following child-birth.

Heart diseases, cerebrovascular diseases, and cancer continued to be the main causes of death. The total number of deaths in the County due to cancer was 202, as compared with 194 in the previous year. There was an increase of twenty in deaths from lung cancer. Unfortunately, the death toll from accidents increased: there were forty-two deaths compared with thirty-three in 1967, despite a reduction in deaths from motor vehicle accidents from eleven to ten. There were eight cases of suicide—four more than in the previous year.

5. (i) DETAILED STATISTICS

<i>Live Births</i>				<i>Male</i>	<i>Female</i>	<i>Totals</i>
Legitimate	...	...	...	824	789	1,613
Illegitimate	...	...	...	63	63	126
Totals				887	852	1,739
<i>Still Births</i>						
Legitimate	...	...	...	10	7	17
Illegitimate	...	...	...	2	3	5
Totals				12	10	22
Live birth rate per 1,000 population				...	...	17.32 (Crude)
						18.71 (Adjusted)
Still-birth rate per 1,000 total live and still-births				...	...	12.49
Total live and still-births				...	...	1,751
Infant Deaths (deaths under 1 year)				...	...	28
Infant Mortality Rates :						
Total infant deaths per 1,000 total live births				...	...	16.09
Legitimate infant deaths per 1,000 legitimate live births				...	...	16.12
Illegitimate infant deaths per 1,000 illegitimate live births				...	...	15.87
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)				...	...	10.35
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)				...	...	8.62
Peri-natal Mortality Rate (still-births and deaths under 1 week combined per 1,000 total live and still-births)				...	...	21.01
Maternity Mortality (including abortion) :						
Number of deaths				...	...	1
Rate per 1,000 total live and still-births				...	...	0.57

(ii) CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE :

Causes of Death	4 weeks												Total All Causes									
	Total Under & over		1 Year		5-15		25-35		45-65		75 and Over											
	All ages	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.													
1. Enteritis and Other Diarrhoeal Diseases	1	1	—	—	—	—	—	—	—	—	—	1										
2. Tuberculosis of Respiratory System	2	2	—	—	—	—	—	—	—	—	—	1										
3. Other Tuberculosis, including late effects	3	3	—	—	—	—	—	—	—	—	—	1										
4. Other Infective and Parasitic Diseases	24	9	—	—	—	—	—	—	—	—	—	4										
5. Malignant Neoplasm—Stomach	43	10	—	—	—	—	—	—	—	—	—	9										
6. Malignant Neoplasm—Lung, Bronchus	16	16	—	—	—	—	—	—	—	—	—	2										
7. Malignant Neoplasm—Breast	8	8	—	—	—	—	—	—	—	—	—	3										
8. Malignant Neoplasm—Uterus	45	45	—	—	—	—	—	—	—	—	—	2										
9. Leukaemia	1	1	—	—	—	—	—	—	—	—	—	1										
10. Other Malignant Neoplasms, etc.	5	9	—	—	—	—	—	—	—	—	—	14										
11. Benign and Unspecified Neoplasms	1	1	—	—	—	—	—	—	—	—	—	18										
12. Diabetes Mellitus	1	1	—	—	—	—	—	—	—	—	—	3										
13. Avitaminoses, etc.	1	1	—	—	—	—	—	—	—	—	—	3										
14. Other Endocrine, etc., Diseases	6	1	—	—	—	—	—	—	—	—	—	1										
15. Anaemias	1	1	—	—	—	—	—	—	—	—	—	—										
16. Mental Disorders	1	4	—	—	—	—	—	—	—	—	—	3										
17. Other Diseases of Nervous System, etc.	7	2	—	—	—	—	—	—	—	—	—	1										
18. Chronic Rheumatic Heart Disease	15	12	—	—	—	—	—	—	—	—	—	1										
19. Hypertensive Disease	211	129	—	—	—	—	—	—	—	—	—	4										
20. Ischaemic Heart Disease	39	40	—	—	—	—	—	—	—	—	—	7										
21. Other forms of Heart Disease	78	93	—	—	—	—	—	—	—	—	—	3										
22. Cerebrovascular Disease	18	28	—	—	—	—	—	—	—	—	—	1										
23. Other Diseases of Circulatory System	5	7	—	—	—	—	—	—	—	—	—	2										
24. Influenza	36	35	—	—	—	—	—	—	—	—	—	7										
25. Pneumonia	40	12	—	—	—	—	—	—	—	—	—	20										
26. Bronchitis and Emphysema	6	5	—	—	—	—	—	—	—	—	—	25										
27. Asthma	4	3	—	—	—	—	—	—	—	—	—	5										
28. Other Diseases of Respiratory System	6	4	—	—	—	—	—	—	—	—	—	1										
29. Peptic Ulcer	4	3	—	—	—	—	—	—	—	—	—	2										
30. Cirrhosis of Liver	5	5	—	—	—	—	—	—	—	—	—	3										
31. Other Diseases of Digestive System	4	4	—	—	—	—	—	—	—	—	—	1										
32. Nephritis and Nephrosis	1	1	—	—	—	—	—	—	—	—	—	2										
33. Hyperplasia of Prostate	3	3	—	—	—	—	—	—	—	—	—	2										
34. Other Diseases, Genito-Urinary System	8	9	—	—	—	—	—	—	—	—	—	1										
35. Other Complications of Pregnancy, etc.	—	2	—	—	—	—	—	—	—	—	—	4										
36. Diseases of Musculo-Skeletal System	4	4	—	—	—	—	—	—	—	—	—	2										
37. Congenital Anomalies	3	6	—	—	—	—	—	—	—	—	—	5										
38. Birth Injury, Difficult Labour, etc.	4	1	3	1	—	—	—	—	—	—	—	1										
39. Other Causes of Perinatal Mortality	4	3	6	—	—	—	—	—	—	—	—	1										
40. Symptoms and Ill-Defined Conditions	4	9	4	—	—	—	—	—	—	—	—	3										
41. Motor Vehicle Accidents	7	3	—	—	—	—	—	—	—	—	—	9										
42. All Other Accidents	19	13	—	—	—	—	—	—	—	—	—	1										
43. Suicide and Self-Inflicted Injuries	4	4	—	—	—	—	—	—	—	—	—	5										
44. All Other External Causes	3	—	—	—	—	—	—	—	—	—	—	—										
Total All Causes	674	543	9	9	4	1	4	3	15	6	8	5	19	8	47	19	120	59	189	141	255	286

(iii) DISTRICT COUNCIL, PEMBROKE COUNTY AND NATIONAL COMPARATIVE VITAL STATISTICS (USING APPROPRIATE AREA COMPARABILITY FACTORS) :

		Live Births		Deaths		Infant Mortality		No. of Maternal Deaths and Rate per 1,000 Live and Still Births	
	Area in Acres	Estimated mid-year Population for 1968	No.	Adjusted Rate per 1,000	No.	Adjusted Rate per 1,000	No.	Rate per 1,000 Live	Rate per 1,000 Live and Still Births
URBAN									
Fishguard and Goodwick U.D.C.	1,841	4,980	71	16.96	78	14.41	—	—	—
Haverfordwest M.B.	1,404	10,330	243	20.13	112	10.73	5	20.58	—
Narberth U.D.C.	122	1,040	15	16.78	34	16.67	—	—	—
Neyland U.D.C.	484	2,380	63	26.47	23	10.63	—	—	—
Milford Haven U.D.C.	2,404	13,640	226	15.91	124	13.09	4	17.69	—
Pembroke M.B.	4,679	13,870	286	21.86	180	12.97	5	17.48	—
Tenby M.B.	1,090	4,540	72	17.76	59	10.66	1	13.88	—
Total	12,024	50,780	976	19.41	610	12.37	15	15.37	—
RURAL									
Cemaes	79,576	8,280	101	14.75	127	13.79	1	9.90	—
Haverfordwest R.D.C.	172,310	23,660	411	19.80	291	14.76	9	21.39	—
Narberth R.D.C.	80,237	9,940	147	17.01	126	11.66	1	6.80	—
Pembroke R.D.C.	48,860	7,700	104	15.79	63	9.74	2	19.23	9.52
Total	380,983	49,580	763	17.85	607	13.22	13	17.04	1 1.29
Whole County	393,007	100,360	1,739	18.71	1,217	12.73	28	16.09	1 0.57
England and Wales	...	...	...	16.9	...	11.9	...	18.00	0.24

SECTION II

LOCAL HEALTH SERVICES PROVIDED BY THE COUNTY COUNCIL UNDER THE NATIONAL HEALTH SERVICE ACT

1. CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE.

Expectant and Nursing Mothers

The development and organisation of a modern maternity service in this County were described in the previous annual report. The permanent appointment of a Consultant Obstetrician for the County and the provision of additional consultant obstetric beds at Haverfordwest, in 1966, were major developments which, combined with the efforts of family doctors, have probably contributed to the appreciable fall in the local perinatal mortality rate—still-births and neo-natal deaths of infants under one week per thousand total live and still-births—during the past two years. The easy availability of hospital maternity beds and of specialist hospital care for mothers and babies are other probable contributory causal factors.

Though meetings of the Local Maternity Liaison Committee for South-West Wales have become very infrequent, the local liaison between the staffs of the hospital maternity units and the domiciliary midwives and health visitors of the County Health department has continued to improve. Mr. B. Higgins, the local Consultant Obstetrician, actively promotes this necessary co-operation.

The trend towards earlier discharge of mothers and babies from local hospital maternity units is continuing though a full 'forty-eight hour' discharge scheme has not been adopted. The staff of the latter units are encouraged to notify confidentially the County Health department of expectant mothers booking a hospital bed so that, when necessary, the advice of the appropriate domiciliary midwives is available to such mothers on the home arrangements for possible early discharge from hospital and on the need for attendance for adequate ante-natal care. This advice supplements the guidance of the appropriate family doctor and, as far as possible, should be given in consultation with him.

An interesting development during the year was the introduction in South West Wales of a new method for the prevention of

haemolytic disease of the new born—a condition which can cause still-births, neo-natal deaths or a severe residual handicap in a surviving child. The scheme involves the injection of appropriately selected mothers, within thirty-six hours of child-birth, with Anti-D immunoglobulin which usually prevents maternal Rh. immunisation and thus reduces appreciably the risk of haemolytic disease in subsequent children.

The demand for 'preparation for child-birth and instruction in mothercraft' classes continued to increase. The appropriate staff of the County Health department organised a series of classes at Haverfordwest, Tenby, Narberth, Hakin, Fishguard, Pembroke Dock and Manorbier. A total of 613 expectant mothers attended, as compared with 533 and 512 in 1967 and 1966 respectively. The syllabus of the classes included an explanation of the development of a baby, health precautions in pregnancy, preparation for the confinement, the simple physiology of birth, and the care of a baby.

Children under School Age

During the last ten years, considerable attention has been given in this County to the development of a preventive service to safeguard the health of such children. Developments have included: an appreciable extension of infant welfare or child health clinics; the initiation of child development and handicap assessment clinics; more attention to health education; the maintenance of registers of children with congenital malformations observable at birth, with handicapping conditions, and 'at risk' of developing a handicap; the maintenance of close co-operation between the consultant orthopaedic surgeon and the orthopaedic sister of the County Health department in dealing with the early treatment and after-care of physically handicapped children with a resultant decrease in the residual disabilities; the appointment and helpful co-operation of the consultant paediatrician for South-West Wales; additional dental clinics; and the introduction of schemes for vaccination against poliomyelitis and measles. In addition to these developments, the augmented local hospital maternity services and the appointment of a consultant obstetrician have contributed to the improved health of the newly born.

The need to continue the aforementioned preventive service, re-designated as the 'Child Health Service,' was stressed in the Welsh Board of Health Circular 34/68 of the 18th October, 1968, which was based on the 1967 report on the 'medical functions and staffing of child welfare centres' prepared by a sub-committee of the Standing Medical Advisory Committee. The circular also recommended that the organisation of the service should continue

to be the responsibility of the staff of the County Health department, but family doctors should play an increasing part in the service in the future. The consideration of the detailed guidance on the future functions of the service, contained in the aforementioned circular, was not completed in 1968 and details will be given in the next annual report.

The Welsh Board of Health Circular 37/68 (Wales) of the 18th October, 1968, drew the attention of the County Council to certain health and other problems of day care facilities for pre-school children and also enclosed a memorandum of guidance for local health authorities on the advisable standards of the day care of children either by child-minders or in day nurseries. In view of the increasing provision of play and nursery groups and day nurseries by private individuals in the County, the contents of the memorandum were of considerable interest. In accordance with a request in the circular, a provisional assessment of the local unsatisfied demand for all-day and part-day care for pre-school children, with special health or social needs, was commenced. It was completed in 1969 and details will be available in the next annual report. The problem of day care facilities for young children is of particular relevance to urban areas with special social needs, such as large industrial towns with considerable immigrant populations, but is of less importance in a predominantly rural County.

Mothers continued to appreciate the advice available at the child health clinics and weighing centres in the County : the total attendances during the year were 26,511 as compared with 25,765 in 1967. Voluntary helpers assisted at a number of clinics and centres and their work deserves commendation.

Dr. M. Lawlor, the deputy County Medical Officer of Health, continued to hold development and handicap assessment clinics at the County Health department, Haverfordwest, and at the clinics in Pembroke Dock and Tenby—118 children were seen at these clinics during the year. They were referred by the consultant paediatrician, family doctors, clinic doctors and health visitors. Dr. K. R. Keay, the Consultant Paediatrician for South-West Wales, was always willing to advise on the medical problems of handicapped children and his reports continued to be very helpful.

No case of phenylketonuria was detected locally in 1968.

Care of Premature Babies

The following statistics of premature births (5 lbs. 8 ozs. and less) in the County during 1966, 1967 and 1968 are of interest :

Year	No. of Premature Live Births	Place of Birth Home Hospital	Died 1st day 2nd-28th day	Premature At Home	Still-births In Hospital
1966	88	4 84	9 6	Nil	16
1967	103	5 98	8 5	1	15
1968	85	7 78	4 8	Nil	10

It was unnecessary to transfer to hospital six of the premature babies born at home, and all survived : one premature baby, 4 lbs. 8 ounces in weight, had to be transferred for specialised nursing in hospital.

During the year the Oxygenaire portable incubator for the ambulance transport of premature babies was used on twenty occasions : with one exception, all were inter-hospital transfers.

The local incidence of premature live births in 1968 was 4.88% of notified live birth, as compared with 5.99% in 1967, and 5.1% in 1966.

Congenital Malformations

The national voluntary scheme of notification of congenital malformations detectable at birth, initiated in 1964, continued to be implemented satisfactorily in Pembrokeshire during 1968. Details of the malformations are notified to the County Medical Officer of Health by the doctors or midwives in attendance, and a monthly statistical return of such notifications is sent to the General Register Office. The main purpose of the scheme is the early detection at the latter office of any causal factors such as the use of particular drugs by expectant mothers or virus infections in pregnancy.

During 1968, thirty-five cases of congenital malformations were reported in Pembrokeshire—seven more than in the previous year.

Classifications of Malformations in 1968

Central Nervous System	Uro-genital System	Naevi of Skin	Alimentary System	Limbs and Skeletal	Other Sites
8	2	2	7	13	3

Distribution of National Welfare Foods and Dried Milk

The administration of this scheme is undertaken at the County Health department and is under the supervision of Mr. D. H. James, a senior clerk.

National welfare foods, branded dried milk and appropriate vitamin preparations are available to mothers at all clinics and most weighing centres in the County. In addition, there are forty-one centres, such as shops in rural areas, at which voluntary workers distribute national welfare foods—this continued assistance facilitates the operation of the local welfare foods scheme and is greatly appreciated.

In accordance with the Welfare Foods Order, 1968, which came into effect on the 31st March, the issue of free milk tokens was extended to certain beneficiaries in large families irrespective of family income—where there are three or more welfare milk beneficiaries in a family all but two of them are now entitled to free milk tokens.

In the Welsh Board of Health Circular 34/68 (Wales), the Minister of Health emphasised the importance of continuing the supply of national dried milk to appropriate mothers at child health clinics—he suggested that this work could be undertaken by voluntary helpers.

The following distribution statistics show the decrease in the demand for national dried milk, vitamin tablets and cod-liver oil, and the increase in the sale of branded dried milk during 1968, as compared with the previous year :

		1968	1967
Packets of National Dried Milk ...	...	11,680	14,251
Bottles of Orange Juice ...	...	24,500	24,496
Bottles of Cod Liver Oil ...	...	1,735	1,837
Packets of Vitamin Tablets ...	...	855	1,208
Packets/Tins of Branded Foods ...	...	86,450	85,775

Dental Care

Further progress was possible during the year with the development of the County Council scheme for the dental care of expectant and nursing mothers and pre-school age children. There was an appreciable increase in the number of the latter children attending the school dental clinics, but, as in previous years, the majority of mothers and young children continued to obtain dental care from local dental surgeons participating in the general dental service.

Dental caries or decay remained prevalent among pre-school children in the County and the dental officers regret the lack of support for the fluoridation of local water supplies, a preventive measure which would reduce appreciably the incidence of this disease.

Considerable attention has been given in recent years to the causation of dental caries and there is evidence that the prolonged exposure of children's teeth to sugary and acid substances may lead to rampant dental caries. On the suggestion of Mr. D. G. James, the Principal School Dental Officer, the health visitors are discouraging the giving of comforters and reservoir feeders, filled with fruit juice or jam or honey, to infants. It is also advisable that sugary and acid soft drinks should not be allowed in excess to all children.

Mrs. J. M. Mears commenced duties as a dental auxiliary on the 19th February, 1968, and she has made a very useful contribution to the dental treatment of children and to dental health education in the primary schools and the mothercraft classes at Haverfordwest.

The following annual statistics, which do not include the dental inspection and treatment of school children, are of interest :

	Expectant and Nursing Mothers	Pre-school Children
First inspections	51	323
Total visits to clinics for inspections and treatment	142	514
Number of fillings	63	298
Teeth extracted	22	109
Scaling and polishing	22	23
Number of completed courses of treatment	28	113
Number of dentures provided ...	7	—
General anaesthetics	24	42

Family planning

The National Health Service (Family Planning) Act, 1967, extended the power of the County Council to provide a family planning service, either directly or through a voluntary body, for all persons irrespective of medical need. The two Pembrokeshire sub-branches of the Family Planning Association agreed to continue the family planning clinics at Haverfordwest, Hakin, Pembroke Dock and Tenby and, with effect from the 1st April, 1968, to operate these clinics in full accordance with the provisions of the aforementioned legislation and the Welsh Board of Health Circulars 5/66 and 15/67. The County Council agreed to provide until further notice the necessary financial grants and to extend the permission for the sessions to be held at the local health authority clinics.

The extended service means that family planning advice is available free of charge at these clinics to all persons irrespective of medical need: persons, with a medical need, are eligible for free supplies of pills or appliances. The determination of medical need is primarily the responsibility of the lady doctors at the clinics.

In the financial year 1968-69, a grant of £2,100 was made to the two local sub-branches of the Family Planning Association.

The willing co-operation of the officials of the aforementioned branches and of Mrs. J. E. Williams, the Branch Organising Secretary of the Family Planning Association, in the implementation of the aforementioned arrangements was much appreciated.

During 1968, 1,977 persons attended for advice at the family planning clinics in the County. Twelve clinic sessions were held monthly.

Details of the arrangements for the taking of cervical cytology smears at the local family planning clinics are given in the section relating to prevention, care and after-care of illness.

Care of Unmarried Mothers and their Children.

The welfare workers of the St. David's Diocesan Moral Welfare Committee continued to be responsible for the major part of the social work for unmarried mothers and their children. The establishment of an office with part-time clerical assistance at St. Peter's Church House, Carmarthen, in 1968, facilitated the liaison between the moral welfare workers and the appropriate County Health department staff. In 1968, the County Council gave a grant of £250 to the aforementioned Committee.

During the year, the moral welfare workers made the necessary arrangements for the admission of twelve unmarried mothers to suitable hostel accommodation.

There were 131 illegitimate births in Pembrokeshire in 1968—one less than in the previous year.

2. DOMICILIARY MIDWIFERY

As in other parts of England and Wales, the reduction in domiciliary confinements continued: the proportion of local births in hospital was 92.9% in 1968 as compared with 90.9% and 84.2% in 1967 and 1966 respectively. As stated in the previous annual report, this trend is resulting in increasing difficulties with the maintenance of an efficient domiciliary midwifery service, and, pending an expected national decision on the future organisation of this service, arrangements were made with the South West Wales Hospital Management Committee for the secondment of certain domiciliary midwives to the maternity units at the County War Memorial and St. Thomas' Hospitals, Haverfordwest, and the South Pembrokeshire Hospital, Pembroke Dock, for periods of practical experience: nine midwives were seconded in 1968. The kind co-operation of the appropriate hospital staff in these arrangements was much appreciated.

The trend towards a shorter stay in hospital continued, but a formal forty-eight hour discharge scheme was not operated in local maternity units.

At the end of the year, eight 'gas and oxygen' (Entonox) analgesia machines were available for use by domiciliary midwives—one additional set was purchased in 1968. Trilene analgesia was used by midwives in five domiciliary confinements.

The efficient functioning of a maternity service requires a satisfactory liaison between family doctors, the appropriate hospital medical and midwifery staff and domiciliary midwives—such a liaison is encouraged locally. The use of the personal record and co-operation card for maternity patients is encouraged.

At the end of the year, no domiciliary midwife was employed on fulltime midwifery, but, to maintain an available domiciliary midwifery service in this rural County, thirty district nurses and district nurse/health visitors, all qualified midwives, were 'on call' for domiciliary midwifery for varying periods during the year and they also participated in ante-natal guidance to expectant mothers and in the care of mothers and babies on early discharge from maternity units.

Five domiciliary midwives attended approved refresher courses at Bristol and Cardiff. In addition to the secondment of certain midwives to local hospitals, the following in-service training of domiciliary midwives was undertaken: a study session was held in September, 1968, at the County War Memorial Hospital, Haverfordwest, at which Mr. Brian Higgins, Consultant Obstetrician, discussed recent developments in antenatal care, the management of labour, and the care of the new born, and Dr. P. W. H. Robinson, Consultant Anaesthetist, gave instruction on obstetric analgesia including the use of the 'Entonox' apparatus and the treatment of neo-natal asphyxia. The willing co-operation of these two consultants was much appreciated.

The County Nursing Officer is the non-medical Supervisor of Midwives.

The following statistics relate to the midwifery services in this County in 1968:

Number of live and still-births	...	...	...	1,761
Number of such births in hospital (including transfers from other areas)	...	...	...	1,636
Number of such births at home (including transfers from other areas)	...	...	...	125
Number of home births attended by private midwives	...	...	...	—
Number of still-births in hospital	...	...	...	21
Number of still-births at home	...	...	...	1
Number of midwives (part-time) employed by the County Council	...	...	...	30
Number of hospital midwives in practice on 31st December, 1968	...	...	...	29
Number of midwives in private practice on 31st December, 1968	...	...	...	—
Number of maternal deaths in hospital	...	...	...	1
Number of maternal deaths at home	...	...	...	—
Number of mothers who received gas and air or oxygen analgesia at home	...	...	...	88
Number of mothers who received pethidine from nurses during confinement at home	...	...	...	72
Number of mothers who received trilene from nurses during confinement at home	...	...	...	12

Number of inspections of midwives by County Nursing Officer :

					Routine	Special
Hospitals	...	...	...	...	5	—
County district nurse/midwives	...	...	...	...	54	19
Private midwives	...	...	...	...	—	—
Private nursing homes	...	...	...	...	—	—

3. HEALTH VISITING

At the end of the year, there were ten full-time health visitors, seventeen district nurse/midwife/health visitors and one district nurse/health visitor on the staff of the department. In recent years, the recruitment of health visitors has been difficult, particularly in the rural areas, and there have been no local applications for health visitors' training scholarships for the past four years. All the health visitors undertake school nursing duties.

Miss M. Morgan, group adviser health visitor, continued certain preventive health and related social work with a limited number of problem families, and also devoted much time to specialised duties including liaison between the staffs of the training centres for the mentally handicapped and parents, and social work with subnormal and severely subnormal persons and their families and with the residents of the 'group unit' home in Haverfordwest for mentally ill patients on discharge from hospital.

Miss L. B. Williams, group adviser health visitor/district nurse/midwife at Tenby, acted as adviser to other staff of the department on health education and also devoted much time to health education sessions at certain secondary and primary schools in the County.

All health visitors are encouraged to undertake group health education and considerable progress was made in 1968. Details are available in the section of this report dealing with health education. Their educational work at the classes for expectant mothers on 'preparation for child-birth and mothercraft' deserves commendation. At some of the latter classes, district nurse/midwives also participated in the instruction.

The health visitors continued to undertake considerable preventive health work with families in social and health difficulties. Progress was also made with the visiting of elderly frail persons, but health visitors have to give priority to the health and related social problems of families with young children.

All health visitors are encouraged to work in close co-operation with family doctors, and, though the progress has been uneven in various parts of the County, this co-operation has become more evident in recent years. Owing to the geographical distribution of practice areas in the County, and other reasons, there are no complete attachment schemes but partial attachment, liaison or linkage schemes of various types have been developed at Tenby, Saundersfoot, Narberth, Newport, St. David's, Haverfordwest, Hakin, Neyland and Pembroke Dock. The Pembrokeshire Local Medical Committee has been made aware that, if any family doctor or group of such doctors has any suggestions for improving the local arrangements for co-operation, early consultations would be welcomed.

The following statistics of health visiting work in 1968 are of interest :

	No. Visited
Children born 1968	1,706
Children born 1967	1,705
Children born 1963-1966	5,235
Persons aged 65 years and over	1,034
Mentally disordered persons	156
Miscellaneous patients requiring after-care visits ...	178
Tuberculous patients	136
Households visited on account of infectious diseases ...	97
Total number of visits	28,954

4. HOME NURSING

The staffing of this service presented few difficulties in 1968 and there were usually several suitable applicants for each vacant post. At the end of the year, the following groups of nurses were employed on home nursing in the County :

District nurse/midwife/health visitors	17
District nurse/health visitors	1
District nurse/midwives	13
District nurses (including one state enrolled nurse) ...	18

A major development was the initiation in September, 1968, of an approved training scheme for local district nurses. The basic theoretical training, for a period of three weeks, is given at the district nurses' training school of the Public Health department of

the City of Cardiff, but, practical instruction, visits to health service establishments, and tutorials are arranged in the County. This development was the result of painstaking work by Miss Young, the County Nursing Officer. The three part-time local instructors in district nursing procedures are Miss M. Owen, Mrs. J. Wilks and Mrs. C. Wilkinson, who are very experienced district nurses. Three local district nurses attended the initial course and completed their training in 1969. The aforementioned local instructors attended a special course on the teaching of district nursing in September, 1968, arranged by the Queen's Institute of District Nursing. A number of the district nurses attended a study day organised by the local branch of the Royal College of Nursing in October, 1968.

A considerable proportion of patients who received home-nursing care were elderly and, as in previous years, included many who had been discharged from geriatric hospital wards. In addition to undertaking this essential nursing care, some district nurses, particularly in the rural areas, continued to visit known elderly infirm people, particularly those living on their own, and, whenever possible, arranged any necessary assistance.

Special equipment is being increasingly used in the home nursing of patients. The heavy demand for disposable absorbent pads (incontinence sheets) and plastic under-sheeting continued. Disposable syringes are now used by all district nurses.

The rehabilitation of 'stroke' patients forms an important part of the work of the district nurses, who spend a considerable amount of time encouraging and assisting these patients to become ambulant and active. The supply of walking-aids has facilitated this work.

Special arrangements are necessary for the home-care of the few paraplegic patients and the support and care of the district nurses were appreciated by these patients and their families.

Efforts to improve the liaison between the district nurses, the general practitioners and the medical and nursing staff of local hospitals continued. The contribution of the local district nursing service to the care of discharged hospital patients has increased appreciably in recent years. This is particularly relevant in view of the disappointing collaboration between the hospital and district nursing services in certain areas of England and Wales revealed by the investigations initiated by the Queen's Institute of District Nursing and published in 1968. There were no full attachments of district nurses to family doctors but, in a number of areas, including Tenby, Saundersfoot, Newport, St. David's, Solva and

Neyland, 'partial attachment' arrangements were in operation during the year.

By arrangement with the Marie Curie Memorial Foundation, five patients suffering from late cancer received assistance, including the provision of additional bed-linen.

In April, 1968, the nurses of the department were pleased to welcome Miss Abrahamsen, Superintendent of Public Health Nurses in Finmark, Norway, as an observer of the work of the community nursing services in the County.

As part of in-service training, notes were distributed to nurses on appropriate health education subjects including the prevention of home accidents and drug dependency.

The following statistics are an indication of the home nursing work during the year :

Total number of patients nursed during the year	...	3,856
Number of children under 5	... ..	301
Number of persons 65 years of age or over	... ..	1,459
Total number of home nursing visits	... ..	91,606

5. VACCINATION AND IMMUNISATION

There were two developments during 1968 : the introduction on the 2nd May of a scheme for the vaccination of children against measles and the local implementation of a revised schedule of vaccination and immunisation procedures in childhood with effect from the 1st November.

The introduction of the former scheme followed extensive vaccine clinical trials in the United States of America and the United Kingdom. Because of the limited supply of the appropriate live attenuated measles vaccine, the scheme was initially restricted to children between the ages of four and seven years and younger children attending day nurseries and nursery schools. Later in the year the scheme was gradually extended to all susceptible children between the ages of one year and fifteen years. There was a reasonable response locally from parents of the appropriate children and, by the end of the year, 2,587 children had been vaccinated against the disease either by family doctors or by doctors of the County Health department.

It is hoped that this scheme will result in either an appreciably reduced incidence of measles or even the virtual disappearance of the disease. Though measles has a very low death rate, it is a miser-

able illness and approximately six per cent. of children suffering from the disease develop complications such as otitis media and severe respiratory infections and, rarely, encephalitis.

The revised schedule of vaccination and immunisation procedures, recommended by the Joint Committee on Vaccination and Immunisation of the Ministry of Health, was introduced in this County on the 1st November, 1968. The primary changes included a postponement of the initial immunisations against diphtheria, whooping cough, tetanus, and poliomyelitis until an infant is six months and the introduction of routine measles vaccination during the second year of life.

The aforementioned developments necessitated an appreciable amount of additional clinical and administrative work in the 'Vaccination and Immunisation' section of the department including a detailed revision of the consent and record cards, and, despite considerable efforts, it was impossible to maintain in 1968 the comparatively high immunisation rates among local children which has been a feature of recent years.

The County Health department continued to be the designated centre for vaccination against yellow fever in South-West Wales: in 1968, ninety-eight persons, including seamen, were vaccinated against this disease.

During the last quarter of the year, press reports on the possibility of an outbreak of influenza in the United Kingdom, due to a new strain of influenza virus known as A2/Hong Kong/1/68 caused some concern and numerous inquiries were received in this department as to the need for vaccination against this strain and the availability of the appropriate vaccine. Notes on these problems, including the suggested priority groups for vaccination, were sent to family doctors in the County on the 7th November, 1968. Supplies of the appropriate vaccine were limited, but, fortunately, the expected outbreak did not occur.

The following vaccination and immunisation statistics relate to children under sixteen years of age:

Number of children who received a primary course of poliomyelitis vaccine (oral)	...	...	...	1,271
Number of children who received a booster dose (oral) (mainly at school entry)	...	...	...	1,172
Number of children protected against whooping cough	...	...	...	1,088
Number of children who received a primary course of immunisation against diphtheria and tetanus	...	...	...	1,194

Number of children who received a booster injection against diphtheria and tetanus (mainly at school entry) ...	1,702
Number of successful primary vaccinations against smallpox in children	634
Number of re-vaccinations against smallpox in children ...	49
Number of children vaccinated against measles	2,587

The statistics of the scheme for B.C.G. vaccination against tuberculosis are in the section of the report dealing with the prevention, care and after-care of illness.

6. COUNTY AMBULANCE SERVICE

The demands on this service continued to be heavy: the mileage of the ambulances and sitting-case cars exceeded the previous year's total by 15,600 despite a decrease of 400 in the number of patients carried.

The increase of mileage was due primarily to the increasing referral of local patients to hospitals outside the County, particularly for certain specialised forms of treatment. The development of the district general hospital at Carmarthen has not only increased the demands on the service but has inevitably added to the difficulties of assuring the availability of ambulances for local emergencies.

To increase the availability of emergency ambulances, certain further measures were taken in 1968: additional ambulance crews were placed on night stand-by duties at Haverfordwest, Tenby and Pembroke Dock during the busy summer period, 1st June to the 30th September; three additional ambulancemen were stationed in the south of the County; an estate car type ambulance, a modified Austin Cambridge, was based at Fishguard; on the disbandment of the Civil Defence Corps, the County Council acquired, primarily as a reserve for use in major accidents, two civil defence ambulances and one minibus suitable for conversion into a reserve ambulance; and the radio communication scheme for ambulances was improved by the transfer of the base station from Haverfordwest to the I.T.A. mast, near Crymych.

In accordance with the request of the Minister of Health in the Welsh Board of Health Circular 22/68 (Wales) of the 30th May, 1968, further consideration was given to the Report (Part 2) of the Working Party on Ambulance Training and Equipment, which contains guidance on matters such as stretcher gear, design of stretchers, emergency treatment equipment, and the suitable design of future ambulances. The County Council accepted the

report as a very useful guide to the selection and replacement of local ambulance equipment and vehicles.

Following the national announcement of the placing of the civil defence organisation on a care and maintenance basis, it was decided, on the advice of the Minister of Health, that the provisional planning of the local ambulance services in war should continue to be a responsibility of the County Health department.

Voluntary personnel of the St. John Ambulance Brigade and British Red Cross Society continued to give helpful assistance to the ambulance service, particularly at Fishguard and Milford Haven. It was unnecessary to request helicopter transport for any civilian patient during 1968.

The following statistics of the Ambulance Service for 1968 are of interest :

Station	Patients		Total No. of Patients	Miles Travelled	Average Miles per Case
	Stretcher	Sitting			
Haverfordwest No. 1	777	2,320	3,097	32,859	10.6
Haverfordwest No. 2	532	2,045	2,586	22,617	8.7
Haverfordwest No. 3	52	1,597	1,649	67,981	41.2
Tegryn ...	193	1,232	1,425	26,174	18.3
Fishguard ...	431	1,605	2,036	37,151	18.2
Milford Haven ...	369	2,700	3,069	25,307	8.2
Pembroke Dk. No. 1	354	1,526	1,880	33,591	17.9
Pembroke Dk. No. 2	377	1,728	2,105	28,682	13.6
Tenby No. 1 ...	292	1,775	2,067	24,467	11.8
Tenby No. 2 ...	385	1,138	1,523	22,777	14.9
Totals ...	3,762	17,675	21,437	321,606	14.0

The following figures illustrate the use of the County Ambulance Service, with the exception of the Sitting Case Car Service, since 1949 :

Year			Patients	Miles	Average Miles per Case
1949	...	...	7,023	148,261	21.11
1950	...	...	9,516	186,007	19.54
1951	...	...	12,086	230,361	19.06
1952	...	...	12,540	220,296	17.57
1953	...	...	14,877	270,762	18.20
1954	...	...	16,690	280,458	16.80
1955	...	...	16,177	284,720	17.60
1956	...	...	18,124	280,542	15.48
1957	...	...	18,741	268,017	14.30
1958	...	...	18,085	264,678	14.74
1959	...	...	17,913	234,083	13.06
1960	...	...	22,294	255,472	11.46
1961	...	...	20,427	232,056	11.36
1962	...	...	21,211	241,496	11.38
1963	...	...	21,315	240,296	11.27
1964	...	...	20,610	245,581	11.91
1965	...	...	21,090	244,063	11.09
1966	...	...	21,683	274,955	12.68
1967	...	...	21,559	298,898	13.90
1968	...	...	21,437	321,606	15.00

The following figures illustrate the use of the Sitting Case Car Service—provided by a number of private car hire proprietors—since 1957 :—

Year			Journeys	Patients	Miles
1957	...	...	2,944	4,535	108,142
1958	...	...	2,674	4,851	96,319
1959	...	...	2,898	5,191	116,525
1960	...	...	2,025	3,312	74,279
1961	...	...	2,446	3,608	91,063
1962	...	...	2,262	3,421	90,793
1963	...	...	2,564	4,335	106,605
1964	...	...	2,096	3,385	84,484
1965	...	...	1,922	3,002	81,867
1966	...	...	1,316	2,189	59,087
1967	...	...	1,120	1,761	48,916
1968	...	...	888	1,482	41,808

7. PREVENTION, CARE AND AFTER-CARE OF ILLNESS

The mental health work, an important part of the above-named service, is described later in this report.

Tuberculosis

The remarkable decline in the incidence of tuberculosis in the County during the past three decades was described in the previous annual report. The detailed statistics, listed in the third section of this report, show that the number of new notifications of the disease in 1968 was the lowest recorded annual total. Five of the ten new cases of respiratory tuberculosis were persons over the age of forty-five years. Despite the marked progress in the fight against tuberculosis, it is important to continue most of the preventive measures.

In 1968, the Welsh Hospital Board reduced appreciably the mobile mass radiography service in Wales and the visit of a mobile unit to this County was restricted to a period of one month during the Autumn. At this visit, 2,568 persons received chest x-ray examinations but no new case of active tuberculosis was discovered. This is an indication of the reduced prevalence of the disease.

On the advice of the Consultant Chest Physician, the County Council supplied, during the year, 15,127 pints of milk for the extra nourishment of tuberculous patients.

The B.C.G. vaccination scheme for thirteen year old children and contacts of tuberculous patients made reasonable progress in the County during 1968 : 755 children, including 61 contacts, were vaccinated against tuberculosis. Of the 707 thirteen year old children tuberculin tested, only 3.6 per cent. were found to be positive. This is another indication of the limited incidence of tuberculosis in Pembrokeshire.

Health Education

In recent years, increasing attention has been given to the development of health education in this County and, though appreciable progress has been possible, further priority needs to be given to this important field of work.

Advice to individuals on health matters is the essential work of health visitors at clinics and during their visits to homes : district nurses and domiciliary midwives, in the course of their normal duties, are often required to give such advice. It is important that these members of the staff should be kept aware of relevant developments and, during the year, a series of special notes were supplied to them on important subjects such as alcoholism, prevention

of accidents in the home, drug dependency, and recent assessments of the health hazards of smoking. These notes were prepared at the County Health department. Detailed information received from the Royal Society for the Prevention of Accidents was used in the preparation of notes on accidents in the home. The World Health Organisation has placed alcoholism among the four most serious health problems of the age. The local incidence of the condition is unknown: a comparatively recent review in the County of Cambridgeshire gave the incidence among adult males as sixty-two per 10,000 and among adult females as fourteen per 10,000. The condition causes much unhappiness particularly in the families of sufferers. The notes on the health hazards of smoking were also distributed to schools to assist teachers with the preparation of appropriate lessons. Despite all the health education on the latter subject in recent years, it is depressing news to learn that the number of cigarettes smoked annually in Britain is equivalent to 2,830 cigarettes per adult—the highest rate in Europe. The best hope of anti-smoking education is to influence young people against smoking.

Further progress was made with group health education in the County. A considerable amount of such education is undertaken by teachers during normal teaching sessions in schools. At the request of the headmasters, health visitors continued to give formal talks, with associated group discussions, to groups of senior pupils at the County Secondary Schools at Tenby, Crymych, Fishguard, Narberth and Pembroke Dock, and similar sessions were initiated at the County Secondary School, Haverfordwest. The subjects included the health services, personal relationships, reproduction, safety in the home, smoking and health, infant care, and dental health. Miss Young, the County Nursing Officer, gave two talks to senior pupils at the County Secondary School, Milford Haven, on teenage problems and preparation for adult life. Despite a special request from the headmaster, it was necessary to defer, because of staff shortages, the provision of special health education sessions at the County Secondary School, St. David's. A limited amount of health education was undertaken by health visitors at a few primary schools, but Mrs. J. M. Mears, the Dental Auxiliary, was able to initiate some interesting dental health education for younger pupils at the infants' and primary schools in the Haverfordwest borough and rural areas. As in other recent years, Miss L. B. Williams, the district nurse/midwife/health visitor, continued to make a major contribution to group health education in the schools and in other places. During the year she gave, by invitation, a series of talks to students of the Trinity College of Education, Carmarthen, on health education in schools.

Many health talks were given by members of the staff of the department at in-service training sessions, meetings of women's organisations and youth clubs: examples included lectures on food hygiene to canteen workers at Pembroke Dock, talks on home nursing and elementary first aid to girl guides at Milford Haven and the Women's Institutes at Fishguard and Croesgoch, and talks on smoking and health and personal relationships to members of the Youth Club at Tenby.

As in previous years, posters on health matters were displayed at the clinics throughout the County. In 1968, forty different health films were borrowed from film libraries for showing to various audiences in the County: the subjects included health services in Britain, dental health, menstruation, sex education, and mental health. The County Health department maintained a library of forty film strips, twelve flannelgraphs, and two tape recordings: all deal with relevant health subjects and are used by health visitors and other members of the staff of the department during group education in the County.

The demand for mothercraft and preparation for child-birth classes for expectant mothers continued to increase: during 1968, regular classes were held at clinics at Haverfordwest, Hakin, Narberth, Fishguard, Tenby, Manorbier and Pembroke Dock. The instructional work of health visitors and other staff at these classes continues to be much appreciated.

In an effort to augment the development of health education, the Government established the Health Education Council in January, 1968. It is too early to comment on its progress, but the functions of the new Council include those previously undertaken, on a limited scale, by the Central Council for Health Education. The latter organisation had provided for a considerable number of years appreciable assistance with health education in the County.

Provision of Home Nursing Equipment

There was no change in the scheme for the distribution of such equipment. Items continued to be issued mainly from the County Health department and the eight depots organised by local members of the Order of St. John and the British Red Cross Society.

The heavy demand for wheel-chairs and walking aids continued: the latter were particularly used in the rehabilitation of 'stroke' patients and, at the end of the year, ninety-six such aids were on loan. Plastic sheeting and disposable absorbent pads for

incontinent patients were also requested frequently. Other items issued included foam-rings, bed-cradles and bed-rests.

The six special mechanical hoists for the care of helpless patients at home remained in use throughout the year.

Chiropody

During the year it was possible to make definite progress with the provision of a chiropody service to meet the needs of the elderly and physically handicapped. The voluntary service of the Pembrokeshire Old People's Welfare Committee, grand-aided by the County Council, was extended, and a complementary direct service was initiated on the 15th July, 1968, with the appointment of Mr. M. R. G. Cavell, who was recently trained at the Welsh School of Chiropody, as a chiropodist on the staff of the County Health department.

In addition to the clinic and domiciliary treatment of patients, Mr. Cavell held treatment sessions at a number of the residential homes for the elderly and at the geriatric wards of Kensington and St. Thomas' Hospitals.

In 1968, six chiropodists participated in the voluntary service and they treated 3,120 persons, as compared with 2,457 in the previous year. The direct chiropody service provided treatment for 245 persons, including 204 of 65 years and over, up to the end of 1968. There were, surprisingly, no demands from expectant mothers for chiropody treatment.

Cervical Cytology : Population Screening for Cancer of the Cervix

The local arrangements for this preventive measure, as described in my previous annual report, were continued during 1968.

Facilities for taking cervical smears continued to be provided at the surgeries of family doctors, at hospital gynaecological or obstetric clinics, and at the family planning sessions held at the County Council clinics at Haverfordwest, Hakin, Pembroke Dock and Tenby. The latter service was not confined solely to the women attending for family planning advice : during the year 746 cervical smears were taken at these sessions, compared with 645 in 1967 : the numbers of smears taken at doctors' surgeries and hospital clinics are not available. The facilities at local hospital gynaecological and obstetric clinics are available only for women referred by their family doctors for the opinion of the gynaecologist and obstetrician.

8. DOMESTIC HELP : HOME HELP SERVICE : NIGHT ATTENDANCE SERVICE

There was little change during the year in the overall pattern of this service, which continued to help primarily elderly infirm persons and chronic sick patients. The latter group included an appreciable proportion of patients recently discharged from the geriatric wards of the local hospitals.

The recruitment of home helps in the holiday and coastal areas of the south of the County remained a problem and the resulting difficulties in the maintenance of an adequate home help service in this area were aggravated by the influx of elderly retired persons. In some of the sparsely populated rural areas, with limited public transport, the maintenance of the service necessitated the recruitment of home helps with some form of personal transport.

During the year, the Home Help Organisers were able, usually at the request of district councils, to assist with the rehabilitation of a number of socially isolated elderly persons who were found to be living in insanitary conditions in their own homes. This work necessitated the use of selected home helps and patient supervision.

The satisfactory liaison continued between the home help service and the appropriate statutory and voluntary organisations. The organisers report that some home helps undertake voluntary additional duties for the elderly such as accompanying them to outpatient clinics and on visits to doctors and hospitals, facilitating their contacts with relatives, supplying garden produce, and making extra evening and weekend visits to their homes. It is difficult to praise too highly these efforts.

The introduction of the meals on wheels service in 1968 in Haverfordwest and Tenby was welcomed by the home help service and a close liaison is maintained between the services.

The provision of in-service training for home helps continued during the year and well-attended training sessions were held at Haverfordwest, Fishguard, Tenby, Hakin, Pembroke Dock and Cilgerran. Thanks are due to the fire-prevention officers, child-care officers, health visitors, geriatric social workers, members of the medical staff of the department, and others who participated in the instruction at these sessions.

The following statistics relating to persons provided with home helps during 1968 are of interest :

Elderly persons (65 years and over)	352
Younger chronic sick and tuberculous patients	38
Maternity patients	18
Mentally disordered patients	4
Other patients	50
Total	<hr/> 462 <hr/>

There was a limited demand for the night attendance service : during 1968, sixteen applications for a night attendant were received, as compared with twenty-two applications in the previous year.

Miss Collins, the Home Help Organiser, and Miss M. A. M. Smith, the Assistant Organiser, were also responsible for the organisation of the cleaning arrangements in the various clinics and certain other establishments of the County Health department.

9. MENTAL HEALTH

The administration and operation of the community services for the mentally disordered continued to be important functions of the County Health department. 1968 was mainly a period of consolidation of the existing services, but, in addition, some expansion was possible. The brief account in the following paragraphs is only a limited review of these services : further details of their organisation are contained in previous annual reports.

There were no major changes at either the Portfield School (a junior training centre) or the Senior (Adult) Training Centre, Tower Hill, Haverfordwest. In 1968 the reconstruction of the premises of the Avenue School and Senior Training Centre, Tenby, commenced and, to facilitate the building arrangements, it was necessary to transfer this establishment to temporary accommodation in the permanent buildings of the old Greenhill school. The difficulties of this transfer were minimised by the kind help received from the staffs of the Education and County Architect's departments and the willing co-operation of all members of the staff of the School and Centre. Despite the transfer, the annual total income from industrial contract work and the sale of handwork at the latter establishment reached a total of £1,381 as compared with £1,225 in 1967.

As in previous years, the members of the two local societies for the mentally handicapped continued to encourage and support the development of the community mental health services. A con-

siderable number of voluntary organisations and individuals maintained their interest in the work of the aforementioned school and centres, and, in addition, donated a number of gifts, particularly of recreational equipment. During the Mental Health Week in June, 1968, open days were held at Portfield School and at the Senior Training Centre, Haverfordwest, and, also, group visits to these establishments were made by teachers and a number of senior pupils and local secondary and grammar schools.

There were difficulties with the development of the social work for the mentally disordered. The main problem continued to be the absence of a community consultant psychiatrist based at Haverfordwest. The staffing problem was aggravated by the resignation of Mr. J. R. Jones, a 'general purpose' social worker and mental welfare officer, on the 31st October, 1968. It was subsequently decided to appoint a senior social worker, with a co-ordinating role for all the personal social services, including mental health, in the County, as a replacement for the latter post, but the appointment was not made until 1969. As in previous years, Miss M. Morgan, Health Visitor, continued to undertake effectively much of the social work with mentally subnormal persons and their families.

The mentally ill patients from the County, who require in-patient treatment, were admitted to St. David's Hospital, Carmarthen. In 1968, 80 were admitted by compulsory order: 76 of the latter were admissions under Section 29 of the Mental Health Act, 1959.

The local development of community care hostels made some progress during the year: pupils and trainees who were unable to travel daily between their homes and the Portfield School and Tower Hill Training Centre were accommodated during the week at the Portfield Hostel; in addition, the housemother at the hostel cared for sixteen mentally handicapped children for various short-term periods during the year; at the end of 1968 the new home for the elderly mentally infirm, Prendergast, Haverfordwest, was nearing completion; and the experimental group unit home for mentally-ill patients, Ellis Avenue, Haverfordwest, contributed to the resettlement of a number of such patients in the community, but the demand for places was surprisingly limited.

An interesting and helpful development in 1968 was the opening, on the 25th January, at the County Health department, Haverfordwest, of a Social Club (with youth club facilities) for mentally handicapped adolescents and adults. Miss M. Morgan,

Health Visitor, was responsible for the initial planning and organisation of this scheme. At first the club was held on one evening a month, but it soon proved a success and a regular weekly evening session was initiated. The Haverfordwest and Area Society for Mentally Handicapped Children and the appropriate parents have welcomed and supported the development of the club and a vigorous voluntary committee, with the voluntary support of certain members of the staff of the County Council and of various local organisations, have contributed appreciably to the success. Activities at the club include table tennis and other indoor games, dancing, and visits to various entertainments and places of interest. At the end of the year, there were twenty-seven members.

The work of the Child Guidance Clinics in the County is described in the 1968 report of the Principal School Medical Officer. The helpful and willing co-operation of Dr. Evan Davies, the Consultant Child Psychiatrist, in the development of the local mental health services and of social work in the County is much appreciated.

The activities of the mental health and geriatric liaison advisory committee for South-West Wales and of the local 'Community Care Group' Society continued in 1968: an account of the membership and functions of these organisations was included in the previous annual report. Towards the end of the year the latter society was re-organised and a more intensive programme of lectures was arranged for the remaining winter months.

The increasing problem of drug addiction, particularly among young persons, continued to cause concern nationally throughout the year. From the available evidence, the problem is still comparatively minor in this County. Alcoholism is, however, not uncommon locally though the true incidence is difficult to ascertain.

SECTION III

EPIDEMIOLOGY: INFECTIOUS AND OTHER
COMMUNICABLE DISEASES

There were no serious outbreaks of any communicable disease in Pembrokeshire during 1968.

A number of changes were made in the law governing the notification of infectious diseases: the Public Health (Infective Jaundice) Regulations, 1968, made infective jaundice a notifiable disease with effect from the 15th June, 1968, with the primary object of facilitating epidemiological investigation into this disease; the Public Health (Infectious Diseases) Regulations, 1968, contained a revised list of notifiable diseases, more in accordance with modern public health opinion, and came into force on the 1st October, 1968.

The former regulations facilitated the inquiries into a local outbreak of infective jaundice or hepatitis which commenced in October, 1967, and continued throughout 1968. The outbreak has been mainly confined to the Milford Haven urban district and the Haverfordwest rural area and the majority of the patients have been children. In general, the illnesses have been mild and no deaths have occurred. From the epidemiological inquiries, undertaken mainly by Dr. M. Lawlor, the deputy County Medical Officer of Health, there has been no evidence that the illness was serum hepatitis or transmitted parentally. Multiple cases in one household have not been common and the spread of infection in schools has been limited. From the 15th June to the end of the year ninety cases were notified. The present knowledge of this disease is, unfortunately, limited, and there is no satisfactory preventive measure applicable to the general population.

For a considerable number of years, acute diarrhoeal illnesses or gastro-enteritis have been comparatively common during the summer months in the busy holiday areas of the County. It appeared that these illnesses were unusually prevalent during the summer of 1968: visitors and residents at Tenby, Saundersfoot and St. David's were particularly affected. Fortunately, the majority of the illnesses remained mild and of short duration. There is evidence that similar outbreaks are not uncommon in other holiday areas at home and abroad.

A number of patients were investigated: no specific pathogens, bacterial or viral, could be isolated from the majority; one patient was found to be suffering from shigellosis—sonne dysentery—and four from salmonellosis. In neither the non-specific nor the

specific infections was any source of infection discovered. There was no evidence of a water-borne transmission of infection. The confirmed dysenteric infection was a child visitor at a caravan site at St. David's and three of the cases of salmonellosis occurred in the same area: two residents, an elderly lady and her grandson, were infected with *salmonella panama* and one visitor, a young adult, was infected with *salmonella typhimurium*. All these patients made a good recovery. The other infection, due to a *salmonella infantis*, occurred in an infant at Haverfordwest. One young girl visitor to a caravan camp at Manorbier was notified as suffering from food poisoning: her symptoms were possibly caused by staphylococcal infection of food, but the diagnosis was not definitely confirmed.

Though it was impossible to attribute the prevalence of all acute diarrhoeal illnesses to contamination of food, it is important to maintain high standards of food hygiene and environmental sanitation at all hotels, guest-houses, caravan sites, other holiday accommodation, restaurants and cafes, and food premises, including mobile shops.

The other communicable diseases caused limited concern during the year: the few sporadic cases of scarlet fever were mild infections; the incidence of measles was limited but it is too early to attribute this trend to the scheme of vaccination against the disease, which was initiated locally in May, 1968; there were a number of suspected cases of brucellosis but no definite confirmed active case was reported to the County Health Department; one ten year old girl had signs of meningitis following an infection with chickenpox, and one three year old boy was found to be suffering from acute pneumococcal meningitis but, fortunately, both patients made a good recovery. No local cases were reported of leptospirosis—despite the rural environment—ornithosis, diphtheria, and poliomyelitis, in 1968.

The confirmed notifications of infectious diseases in this County in 1968 are listed in the following tables :

<i>Disease</i>	Haverfordwest M.B.	Tenby M.B.	Pembroke M.B.	Fishguard & Goodwick U.D.	Milford Haven U.D.	Neyland U.D.	Narberth U.D.	Haverfordwest R.D.	Narberth R.D.	Pembroke R.D.	Cemaes R.D.	TOTALS
Acute Encephalitis ...	—	—	—	—	—	—	—	—	—	—	—	—
Acute Meningitis ...	—	—	—	—	—	—	—	1	—	—	—	1
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ...	—	—	—	—	—	—	—	1	—	—	—	1
Infective Jaundice ...	—	—	1	2	62	4	—	21	—	—	—	90
Leptospirosis ...	—	—	—	—	—	—	—	—	—	—	—	—
Measles ...	10	16	7	1	9	4	—	21	—	18	2	88
Ophthalmia												
Neonatorum ...	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever ...	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	2	—	5	—	2	1	—	3	—	1	—	14
Tetanus ...	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever ...	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ...	—	—	1	—	—	1	—	5	—	—	—	7
Food Poisoning ...	1	—	—	—	—	—	—	3	—	—	—	4
TOTALS ...	13	16	14	3	73	10	—	55	—	19	2	205

Tuberculosis

Comments on the incidence of this disease are given in a previous section of the report relating to the prevention, care and after-care of illness.

The following tables are of interest :—

1. NUMBER AND AGE DISTRIBUTION OF NEW NOTIFICATIONS OF TUBERCULOSIS AND DEATHS FROM THIS DISEASE IN 1968

Age Group in years	New Notifications				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0— 1 ...	—	—	—	—	—	—	—	—
1— 2 ...	—	—	—	—	—	—	—	—
2— 5 ...	—	—	—	—	—	—	—	—
5—10 ...	—	—	—	—	—	—	—	—
10—15 ..	—	—	—	—	—	—	—	—
15—20 ...	—	—	—	—	—	—	—	—
20—25 ...	—	2	—	—	—	—	—	—
25—35 ...	—	1	—	1	—	—	—	—
35—45 ...	1	1	—	—	—	—	—	—
45—55 ...	1	2	—	—	—	—	—	—
55—65 ...	—	—	—	—	—	—	2	—
65—75 ...	—	2	—	—	1	1	—	—
75 plus ...	—	—	—	—	1	1	—	—
Totals	2	8	—	1	2	2	2	—

2. NOTIFICATIONS OF AND DEATHS FROM TUBERCULOSIS 1939-1968

Year	New Notifications of Tuberculosis		Deaths from Tuberculosis		
	Respiratory	Non- Respiratory	Respiratory	Non- Respiratory	
1939	...	88	27	43	12
1940	...	53	18	38	10
1941	...	64	22	26	14
1942	...	88	19	43	8
1943	...	63	32	22	1
1944	...	73	21	36	1
1945	...	73	24	32	5
1946	...	64	18	25	4
1947	...	68	14	36	3
1948	...	62	29	24	1
1949	...	73	18	41	1
1950	...	62	16	28	3
1951	..	66	9	26	9
1952	...	51	5	24	1
1953	...	63	6	22	6
1954	...	61	9	15	1
1955	...	35	7	14	3
1956	...	49	4	8	2
1957	...	36	4	11	1
1958	..	38	3	7	—
1959	...	26	1	8	3
1960	...	29	1	8	—
1961	..	26	3	14	2
1962	...	32	3	8	—
1963	...	34	2	8	—
1964	...	26	5	11	—
1965	...	25	6	3	1
1966	...	18	4	3	—
1967	...	15	2	5	—
1968	...	10	1	4	2

SECTION IV

MISCELLANEOUS

1. MILK

Dairy farming continued to be an important part of the economy of the County: at the end of 1968, there were 2,325 registered dairy farms; it has been estimated that approximately forty-four million gallons of milk were produced locally in 1968; and the County Agricultural Adviser has stated that Pembrokeshire leads Wales in the trend of expanding dairy herds.

In November, 1968, the National Agricultural Advisory Service of the Ministry of Agriculture, Fisheries and Food arranged, in conjunction with the County Branch of the National Farmers' Union, a Pembrokeshire Dairy Week. The activities during the week were primarily intended for the guidance and further education of dairy farmers and, from the health aspect, it was pleasing to note the emphasis in the exhibition and in the helpful published guide on problems such as the production of clean milk, the prevention of mastitis of cows, the control of brucellosis, and the implementation of the Brucellosis (Accredited Herds) Scheme. The latter scheme is making progress in the County: at the end of 1968 there were eight accredited herds and sixty-three herds under surveillance.

During 1968 considerable attention was given, primarily by the sampling officers of the Weights and Measures Department, to the submission of samples of non-heat treated retail milk for screening ring tests for brucella abortus infection and, when necessary, for confirmatory culture tests. In addition, they undertook conscientiously the sampling of milk from individual cows in attempts to trace the sources of infections in affected dairy herds. A total of 2,512 samples of raw milk were tested for brucella infection during the year: 394 gave a positive ring test and cultures confirmed the infection in 35 samples. Some of these samples were taken from the same herd. In accordance with the guidance in the Welsh Board of Health Circular 17/66 (Wales), five heat treatment notices were served by district Medical Officers of Health on producer retailers or producers during the year as compared with ten similar notices in 1967.

When milk is subjected to heat treatment, it is important to ensure that the process, including the temperature control, is satisfactory. Most of the pasteurised (heat treated) milk sold locally comes from a pasteurisation plant outside the County, but, there are three small plants operating locally: two use the 'batch'

method and the other the 'high temperature-short time' process. Careful surveillance of these plants and the associated bottle washing arrangements is essential and, towards the latter part of the year, the hygienic conditions and lack of recorded temperature control at one of the plants caused some concern and, early in 1969, the problem had to be specially considered by the Public Health and Housing Committee.

Of the 156 samples of heat treated (pasteurised) milk tested during the year, 36 failed the methylene blue test for keeping quality and one the phosphatase test for correct heat treatment: 264 laboratory tests of bacterial purity of washed milk bottles were undertaken and 24 were unsatisfactory.

Dr. H. D. S. Morgan, Consultant Bacteriologist, and his staff at the Public Health Laboratory, Carmarthen, were responsible for all the aforementioned laboratory tests and, as in previous years, their advice and assistance were most helpful.

In the 1966 and 1967 annual reports, reference was made to the problem of the presence of antibiotics in milk consequent on their use in the treatment of mastitis in dairy cows. It is pleasing to report that, of the 557 milk samples tested in 1968, only 8—1.4 per cent.—contained antibiotics: this is the lowest percentage recorded in this County in recent years.

It is very pleasant to record a further sincere tribute to the conscientious work of the appropriate staff of the Weights and Measures department in all the above-named measures to safeguard the purity of local milk supplies.

The other sampling results in the enforcement of legislation relating to the chemical quality and adulteration of milk are described in the latter part of this section.

2. FOOD

The enforcement of the legislation relating to food hygiene, including food handling and the protection of foods from risk of contamination, is primarily the responsibility of the district councils in this area, and details of local action are contained in the reports of the district medical officers of health and public health inspectors.

The main role of the County Council in food legislation remains limited to the local enforcement of the parts of the Food and Drugs Act, 1955, and of the relevant food regulations and orders, concerned with the labelling, composition and quality of foods and drugs. The staff of the Weights and Measures department continued to undertake the sampling of food and drugs in

the County, and I am grateful to Mr. F. W. J. Read, the Chief Inspector of Weights and Measures, for details of the results of sampling during 1968. A brief summary is as follows:—

Food	No. of Samples	Non-Genuine	Defects
Milk	558	57	included low fat content, added water and foreign matter.
Ice-cream	9	—	—
Butter, Margarine and Cooking Fat	15	1	excess water in one sample of butter.
Tinned Meat and Fish	45	4	included insufficient meat content (1 sample).
Jams and related Products	43	4	included insufficient sugar content (3 samples).
Soft Drinks	29	8	included non-permissible colouring (3 samples).
Alcoholic Drink	3	1	incorrectly labelled.
Miscellaneous, including Bread, Dried Fruit, Condiments	223	46	comparatively minor defects
Drugs	27	2	included tincture of iodine with insufficient iodine content and calamine lotion with excess zinc oxide.

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3. NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

At the end of 1968, there was one registered child minder at Saundersfoot and seven day nurseries in the County—four in Haverfordwest and one in Milford Haven, Johnston and Letters-ton. Four of these nurseries were initially registered during the year and this reflects the national trend of an increasing demand for day care facilities for pre-school children.

The appropriate staff of the department made regular visits of inspection and advised on the health and social problems of the children.

In order to qualify for registration in accordance with the relevant regulations, certain conditions must be met relating to the suitability of staff and premises and the adequacy of facilities and safety measures. The maximum number of children which may be accepted and the arrangements for the notification of infectious diseases are also specified in the conditions. It is necessary for the staff to have a chest x-ray on appointment and thereafter triennially.

To ensure more adequate public health control of child minders and day nurseries, stricter national legislation governing their registration came into operation on the 1st November, 1968 : this legislation, contained in the Health Services and Public Health Act, 1968, amended the Nurseries and Child Minders Regulation Act, 1948, and specified that the following must be registered by the County Council :

(i) premises, other than those used wholly or mainly as private dwellings, in which children are received, on a daily basis, to be looked after for a total of two hours or more in a day.

(ii) persons, who in their own homes and for reward, look after one or more children under the age of five, to whom they are not related, for similar periods.

Suitable publicity was given to these statutory requirements.

4. MEDICAL EXAMINATION OF COUNTY STAFF :

The following examinations were undertaken during 1968 :

Entrants (excluding teachers and police) to County Council employment)	...	...	...	...	...	291
Manual workers for entry into sickness benefit scheme	...					44
Police candidates	...	...	...	...	...	7
Police cadets	..	...	...	...	...	2
Entrants to Teachers' Training Colleges				...	...	141
Newly appointed teachers	...	...	...	...	...	101
Canteen staff	...	...	...	...	...	134
Re-examination of existing employees	...			...	...	15
Number of chest x-ray examinations of staff (excluding mass radiography examinations)		...	...	...	...	302
Examinations carried out on behalf of other local authorities (reciprocal arrangements)	...	...	...	...	...	12

The triennial chest x-rays of school canteen staffs were undertaken at the Mobile Unit of the Mass Radiography Service.

